

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BA	70385	
O.I.P.E. CLASSIFIER		8	2/16/00
FORMALITY REVIEW	VB	60702	2/16/00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	4-4-03
2	✓	✓	10-31-03
3	✓	✓	6-18-04
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
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Best Available Copy

If more than 150 claims or 10 actions  
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